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<b>Application Data Sheet 37 CFR 1.76</b>		Attorney Docket Number	33705-US-PCT
		Application Number	
Title of Invention	GASTRORESISTANT PHARMACEUTICAL DOSAGE FORM COMPRISING N-(2-(2-PHTHALIMIDOETHOXY)-ACETYL)-L-ALANYL-D-GLUTAMIC ACID (LK-423)		
<p>The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following form contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76.</p> <p>This document may be completed electronically and submitted to the Office in electronic format using the Electronic Filing System (EFS) or the document may be printed and included in a paper filed application.</p>			

**Secrecy Order 37 CFR 5.2**

- ☐ Portions or all of the application associated with this Application Data Sheet may fall under a Secrecy Order pursuant to 37 CFR 5.2 (Paper filers only. Applications that fall under Secrecy Order may not be filed electronically.)

**Applicant Information:**

<b>Applicant 1</b>				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	MARIJA		BOGATAJ	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	LOGATEC	Country Of Residence <sup>i</sup>	SL	
Citizenship under 37 CFR 1.41(b) <sup>i</sup>		SL		
Mailing Address of Applicant:				
Address 1		STRANSKA POT 8		
Address 2				
City	LOGATEC	State/Province		
Postal Code	1370	Country <sup>i</sup>	SL	
<b>Applicant 2</b>				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	ALES		MRHAR	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	LJUBLJANA	Country Of Residence <sup>i</sup>	SL	
Citizenship under 37 CFR 1.41(b) <sup>i</sup>		SL		
Mailing Address of Applicant:				
Address 1		MILANA MAJCNA 35		
Address 2				
City	LJUBLJANA	State/Province		
Postal Code	1000	Country <sup>i</sup>	SL	
<b>Applicant 3</b>				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	ANTON		LAVRIC	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	SKOFLJICA	Country Of Residence <sup>i</sup>	SL	

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		Application Number	
Title of Invention	GASTRORESISTANT PHARMACEUTICAL DOSAGE FORM COMPRISING N-(2-(2-PHTHALIMIDOETHOXY)-ACETYL)-L-ALANYL-D-GLUTAMIC ACID (LK-423)		

Citizenship under 37 CFR 1.41(b) i		SL	
Mailing Address of Applicant:			
Address 1		GASILSKA 24	
Address 2			
City	SKOFLJICA	State/Province	
Postal Code	1291	Country <sup>i</sup>	SL
<b>Applicant 4</b>			
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
		<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name
	MANICA		CERNE
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	LG	Country Of Residence <sup>i</sup>	SL
Citizenship under 37 CFR 1.41(b) i		SL	
Mailing Address of Applicant:			
Address 1		MATENA 1	
Address 2			
City	LG	State/Province	
Postal Code	1292	Country <sup>i</sup>	SL
<b>Applicant 5</b>			
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
		<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name
	DORIS		TIBAUT
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	SL	Country Of Residence <sup>i</sup>	SL
Citizenship under 37 CFR 1.41(b) i		SL	
Mailing Address of Applicant:			
Address 1		POVSETOVA 104	
Address 2			
City	LJUBLJANA	State/Province	
Postal Code	1000	Country <sup>i</sup>	SL
<b>Applicant 6</b>			
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
		<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name
	ANTON		STALC
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	LJUBLJANA	Country Of Residence <sup>i</sup>	SL
Citizenship under 37 CFR 1.41(b) i		SL	

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<b>Mailing Address of Applicant:</b>				
Address 1		RASISKA 5		
Address 2				
City	LJUBLJANA	State/Province		
Postal Code	1000	Country <sup>i</sup>	SL	
<b>Applicant 7</b>				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	UROS		URLEB	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City		Country Of Residence <sup>i</sup>		
Citizenship under 37 CFR 1.41(b) <sup>i</sup>		SL		
<b>Mailing Address of Applicant:</b>				
Address 1		PERICEVA 29		
Address 2				
City	LJUBLJANA	State/Province		
Postal Code	1000	Country <sup>i</sup>		
<b>Applicant 8</b>				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	TATJANA		MATEOVIC	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City		Country Of Residence <sup>i</sup>		
Citizenship under 37 CFR 1.41(b) <sup>i</sup>		SL		
<b>Mailing Address of Applicant:</b>				
Address 1		MALNARJEVA 43		
Address 2				
City	LJUBLJANA	State/Province		
Postal Code		Country <sup>i</sup>	SL	
<b>Applicant 9</b>				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	GRETA		COF	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City		Country Of Residence <sup>i</sup>		
Citizenship under 37 CFR 1.41(b) <sup>i</sup>		SL		

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<b>Mailing Address of Applicant:</b>				
Address 1		ZBILJSKA CESTA 103		
Address 2				
City	MEDVODE	State/Province		
Postal Code	1215	Country <sup>i</sup>	SL	
<b>Applicant 10</b>				
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
				<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	JANEZ		KERC	
Residence Information (Select One) <input checked="" type="radio"/> US Residency <input type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	LJUBLJANA	State/Province	Country of Residence <sup>i</sup>	SL
Citizenship under 37 CFR 1.41(b) <sup>i</sup>		SL		
<b>Mailing Address of Applicant:</b>				
Address 1		TREBINJSKA 7		
Address 2				
City	LJUBLJANA	State/Province		
Postal Code	1000	Country <sup>i</sup>	SL	
<b>Applicant 11</b>				
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
				<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	ROK		DREU	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	SLOVENJ GRADEC	Country Of Residence <sup>i</sup>	SL	
Citizenship under 37 CFR 1.41(b) <sup>i</sup>		SL		
<b>Mailing Address of Applicant:</b>				
Address 1		POT OB HOMSNICI 23		
Address 2				
City	SLOVENJ GRADEC	State/Province		
Postal Code	2380	Country <sup>i</sup>	SL	
<b>Applicant 12</b>				
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
				<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	FUMIO		YONEDA	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	OSAKA	Country Of Residence <sup>i</sup>	JP	
Citizenship under 37 CFR 1.41(b) <sup>i</sup>		JP		

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<b>Mailing Address of Applicant:</b>				
Address 1		UEDA 3-6-20-902, MATSUBARA CITY		
Address 2				
City	OSAKA	State/Province		
Postal Code	580-0016	Country <sup>i</sup>	JP	
<b>Applicant 13</b>				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	SHIZUKO		MURAOKA	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	OSAKA	Country Of Residence <sup>i</sup>	JP	
Citizenship under 37 CFR 1.41(b) <sup>i</sup>		JP		
<b>Mailing Address of Applicant:</b>				
Address 1		UEDA 3-6-20-902, MATSUBARA CITY		
Address 2				
City	OSAKA	State/Province		
Postal Code	580-0016	Country <sup>i</sup>	JP	
All Inventors Must Be Listed - Additional Inventor Information blocks may be generated within this form by selecting the Add button. <span style="float: right;">Add</span>				

**Correspondence Information:**

Enter either Customer Number or complete the Correspondence Information section below. For further information see 37 CFR 1.33(a).			
<input type="checkbox"/> An Address is being provided for the correspondence Information of this application.			
Customer Number	01095		
Email Address	stephen.auten@novartis.com	Add Email	Remove Email
Email Address	roshanara.dias@novartis.com	Add Email	Remove Email

**Application Information:**

Title of the Invention	GASTRORESISTANT PHARMACEUTICAL DOSAGE FORM COMPRISING N-(2-(2-PHTHALIMIDOETHOXY)-ACETYL)-L-ALANYL-D-GLUTAMIC ACID (LK-423)		
Attorney Docket Number	33705-US-PCT	Small Entity Status Claimed <input type="checkbox"/>	
Application Type	Nonprovisional		
Subject Matter	Utility		
Suggested Class (if any)		Sub Class (if any)	
Suggested Technology Center (if any)			
Total Number of Drawing Sheets (if any)		Suggested Figure for Publication (if any)	

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<b>Publication Information:</b>	
<input type="checkbox"/>	Request Early Publication (Fee required at time of Request 37 CFR 1.219)
<input type="checkbox"/>	Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not been and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.

## Representative Information:

<p>Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.</p>			
Please Select One:	<input checked="" type="radio"/> Customer Number	<input type="radio"/> US Patent Practitioner	<input type="radio"/> US Representative (37 CFR 11.9)
Customer Number	01095		

## Domestic Priority Information:

<p>This section allows for the applicant to claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)(4), and need not otherwise be made part of the specification.</p>			
Prior Application Status		<a href="#">Remove</a>	
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)
<p>Additional Domestic Priority Data may be generated within this form by selecting the <b>Add</b> button.</p>			

## Foreign Priority Information:

<p>This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).</p>			
<a href="#">Remove</a>			
Application Number	Country	Parent Filing Date (YYYY-MM-DD)	Priority Claimed
P200400094	SL	2004-03-26	<input checked="" type="radio"/> Yes <input type="radio"/> No
<p>Additional Foreign Priority Data may be generated within this form by selecting the <b>Add</b> button.</p>			

## Assignee Information:

<p>Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.</p>	
<b>Assignee 1</b>	
<p>If the Assignee is an Organization check here. <input checked="" type="checkbox"/></p>	

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Organization Name	LEK PHARMACEUTICALS D.D.		
<b>Mailing Address Information:</b>			
Address 1	Verovskova 57		
Address 2			
City	SLO-1526 Ljubljana	State/Province	
Country <sup>1</sup>	SL	Postal Code	
Phone Number		Fax Number	
Email Address			
Additional Assignee Data may be generated within this form by selecting the Add button.			

**Signature:**

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.					
Signature	/STEPHENAUTEN/			Date (YYYY-MM-DD)	2006-09-25
First Name	STEPHEN	Last Name	AUTEN	Registration Number	47396

This collection of information is required by 37 CFR 1.76. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 23 minutes to complete, including gathering, preparing, and submitting the completed application data sheet form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**